## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/552705 APPLICANT(S)

FILING DATE

## CLAIMS

	AS FILED		AFTER 1°AMENDMENT		AFTER 1 <sup>54</sup> AMENDMENT				AS FILED		AFTER CAMENDMENT		AFTER 1 MANEENDMENT	
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